

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC UTILITIES

ONE SOUTH STATION, 5TH FLOOR BOSTON, MA 02110 617-305-3500

Gas Retail Agent License Application for New Applicants Pursuant to 220 C.M.R. § 14.00 et seq.

REQUIRES ANNUAL FEE and ANNUAL RENEWAL

Please submit an original, two copies, and an electronic copy on CD-ROM formatted for Microsoft Word to the address above along with a \$100.00 annual fee.

I. GENERAL BUSINESS INFORMATION

1.	Legal Name of Applicant:
	Doing business as (D/B/A):
2.	Business Address:
3.	If a corporation, association, or partnership: (a) Organized under the laws of which state:
4.	Name, Title, and Business Address of all Officers and Directors, Partners, or other similar Officials:
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	Name	Title
	Address	
	Toll-Free Telephone Number (required)	Email
	Name, Title, and Telephone Number	er and Email Address of Regulatory Contact Perso
	Name	Title
	Address	
	Telephone	Email
	Fax Number and Internet Address	
	Name and address of Resident Ager purposes of G.L. c.233A, § 3:	nt for Service of Process in Massachusetts for
	Identify the number of staff employ	red by the Applicant.
	Provide resumes or biographies of k	key staff persons.
).	Provide a description of the services has provided since the company wa	s (both energy-related and other) that the Applica s formed.
l.	Identify if the Applicant is currently Massachusetts If applicable include	y or applying to become an Electric Retail Agent i

II. PROPOSED SERVICES

12. Identify the service territories and customer classes the Applicant intends to provide gas retail agent services in Massachusetts:

	Residential	Commercial & Industrial
Bay State Gas Company		
Berkshire Gas Company		
Blackstone Gas Company		
Fitchburg Gas and Electric		
Light Co.		
National Grid		
(Boston Gas & Colonial Gas)		
New England Natural Gas		
Company		
NSTAR Gas Company		

13.	For each customer	class identified above	, provide a	description	of the sp	ecific .	gas 1	etail
	agent services that	the Applicant intends	to provide					

14.	Provide a sta	atement that	the applican	t will comply	with the	information	disclosure
	regulations (220 C.M.R.	14.05).				

III. <u>TECHNICAL ABILITY</u>

15. Identify the states in which the Applicant currently provides gas retail agent services.

IV. MARKETING AND CUSTOMER SERVICE

16. Identify all methods by which the Applicant intends to market to customers in Massachusetts:

Referrals/existing relationships
Direct mail
Telemarketing
Internet/email
TV/radio/newspaper
Door-to-door
Other:

17. If applicable, provide a sample Bill demonstrating the Applicant's familiarity with 220 C.M.R. 14.04 (Applies to Applicants that plan to bill Retail Customers in accordance with the passthrough billing option, as set forth in 220 C.M.R. 14.03(6)(c)(1)).

If Applicant intends to serve residential customers, answer questions 18-23:

- 18. For each marketing method identified above, state whether the method will be performed by in-house employees or outsourced/contract/third-party representatives. Provide copies of marketing materials that reflect the Applicant's latest practices.
- 19. If the Applicant intends to use a telemarketing campaign, provide a copy of the telemarketing script and Third Party Verification (TPV) script.
- 20. Describe the Applicant's plan to train sales, marketing, and customer service staff identified above. Provide copies of training materials that reflect the company's latest practices.
- 21. How will Applicant communicate pricing to customers?
- 22. For each state where the Applicant is licensed to provide gas retail agent services (identified in Item 15), specify whether the Applicant serves residential customers.
- 23. For each state where the Applicant is licensed to serve residential customers, provide the total number of complaints per month on file with the state public utility commission over the last 24 months.
- 24. Provide copies of any contracts between the Applicant and potential residential customers that those customers will be required to sign. The contract(s) must be specific to the Massachusetts market and to residential customers. (Optional)

V. <u>LEGAL AND REGULATORY INFORMATION</u>

- 25. Provide a statement (with appropriate citation to corporate articles or by-laws or other operative documents) that acting as a gas retail agent is not an *ultra vires* purpose (beyond the scope) of the entity.
- 26. Provide a description of the corporate structure of the Applicant (<u>e.g.</u>, identification of parent company, affiliates, owners).

- 27. Provide a summary of any history of bankruptcy, dissolution, merger, or acquisition of the entity in the last two calendar years immediately preceding the application.
- 28. Provide a statement identifying whether any director, officer, or other similar official has been convicted of a felony as defined by G.L. c. 274, § 1, or the equivalent law of any other jurisdiction, involving business fraud, or held liable for any antitrust violation pursuant to G.L. c. 93, c. 93A or the equivalent law of any other jurisdiction and whether the applicant business entity has itself been held liable for business fraud or antitrust violation (including the date and place of conviction or verdict, and nature of offense found).
- 29. Provide a statement identifying whether there have been any regulatory actions taken against the Applicant in any jurisdiction in the last two calendar years immediately preceding the application.
- 30. Provide documentation establishing that the signatories to this application are authorized so to act on behalf of the Applicant in filing this application (e.g., in the case of a corporate applicant, a vote of the board of directors authorizing the signatories to bind the corporation).

VI. <u>DECLARATION</u>

I/We,		an	d,					
(print name a	(print name and title) (print name and title)							
	ave personally revi				•			
_	ete in all material re	-						
in this application	was prepared and o	compiled und	er our superv	ision an	d control. I/We f	urther		
declare that I/we a	re authorized by th	e applicant to	file this app	lication	on its behalf. I/V	/e		
acknowledge that	we have a positive	duty to ascert	tain the accur	racy and	completeness of	this		
application and tha	nt I/we sign this ded	claration unde	er personal pa	ains and	penalties of perju	ıry,		
including, but not	limited to, those pr	ovided by G.	L. c. 268, § 6).				
Dated this	day of		20	at				
(day	·)	(month)	(year)		(place of execution)			
Cianatura								
Title								
Signature:								
Title:								
NOTARIZATION	·:							
Notarial Seal:								

Date of Form: XXXX XX, 2014

Mail Application with Fee to: Mark Marini Secretary MA Department of Public Utilities 1 South Station Boston, MA 02110